FORM D

UNITED STATES SEC Mail Processing SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

JUN - 2 2008

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NOTICE OF SALE OF SECURATION DC PURSUANT TO REGULATION DQ SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

| SEC USE ONLY | | | | | | | |
|---------------|--|--|--|--|--|--|--|
| Serial | | | | | | | |
| | | | | | | | |
| DATE RECEIVED | | | | | | | |
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| Filing Under (Check box(es) that apply): Rule 504 Rule 505 X Rule 506 Type of Filing: New Filing Amendment | Section 4(6) ULOE PROCESSED |
|---|-----------------------------|
| A. BASIC IDENTIFICATIO | ON DATA JUN 0 6 2008 |
| 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicated the changed and indicated the changed are changed. L.P. | e change.) THOMSON REUTERS |
| Address of Executive Offices (Number and Street, City, 6244 NASHVILLE RD, BOWLING GREEN KY 42101 Address of Principal Business Operations (Number and Street, City, if different from Executive Offices) | 270 843 0060 |
| Brief Description of Business | 08050914 |
| Type of Business Organization corporation business trust limited partnership, already formed limited partnership, to be formed | other (please specify): |
| Actual or Estimated Date of Incorporation or Organization: Month Year Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service above CN for Canada; FN for other foreign j | |

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

| A BASIC DENTIFICATION DA | TA SECTION SEC |
|---|--|
| 2. Enter the information requested for the following: | |
| • Each promoter of the issuer, if the issuer has been organized within the past five yea | rs; |
| Each beneficial owner having the power to vote or dispose, or direct the vote or disposit | tion of, 10% or more of a class of equity securities of the issuer. |
| Each executive officer and director of corporate issuers and of corporate general and | managing partners of partnership issuers; and |
| Each general and managing partner of partnership issuers. | • |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Offi U S ENERGY PARTNERS, INC. | cer Director X General and/or Managing Partner |
| Full Name (Last name first, if individual) | |
| 6244 NASHVILLE RD, BOWLING GREEN KY 42101 | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | |
| , | |
| Check Box(es) that Apply: Promoter Beneficial Owner K Executive Offi | cer Director General and/or |
| SHELTON, CLAY M PRESIDENT | Managing Partner |
| Full Name (Last name first, if individual) | |
| 6244 NASHVILLE RD, BOWLING GREEN KY 42101 | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | |
| | |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Off | icer Director General and/or Managing Partner |
| Full Name (Last name first, if individual) | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | |
| business of Residence Address (Number and Street, City, State, 21p Code) | |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Off | icer Director General and/or Managing Partner |
| Full Name (Last name first, if individual) | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Off | icer Director General and/or Managing Partner |
| Full Name (Last name first, if individual) | |
| Tuli Ivalle (Dast liane 1951, i) hidridual) | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | |
| | |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Off | ficer Director General and/or Managing Partner |
| Full Name (Last name first, if individual) | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | |
| | |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Off | ficer Director General and/or Managing Partner |
| Full Name (Last name first, if individual) | |
| | |
| Business or Residence Address (Number and Street, City, State, Zip Code) | |
| | |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

| 42 | e e e e e e e e e e e e e e e e e e e | *** | · ···································· | B. 1N | FORMATI | ON ABOU | r offeri | NG _ | · • | | · | |
|--|---------------------------------------|----------------------|--|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|---------------------------------------|
| | | | | | | | | | | | Yes | No |
| 1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? | | | | | | | | | | ******* | | X |
| Answer also in Appendix, Column 2, if filing under ULOE. | | | | | | | | | | | \$ | |
| 2. What is the minimum investment that will be accepted from any individual? | | | | | | | | | | | y Yes | No |
| 3. Does | the offering | permit joint | t ownership | p of a sing | le unit? | | | | | | | K |
| 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) | | | | | | | | | | | | |
| | - | first, if indi | ividual) | | | | | | | | | |
| NON | r Residence | Address (N | lumber and | Street C | ty State 7 | in Code) | | . | | | | · · · · · · · · · · · · · · · · · · · |
| Business | r Kesidence | Address (IV | dinoer and | i street, Ci | ity, State, Z | ip Code) | | | | | | |
| Name of A | ssociated B | roker or De | aler | | | | | | | | | |
| States in V | Vhich Person | Listed Has | s Solicited | or Intends | to Solicit | Purchasers | | | | • | | |
| (Chec | k "All State | s" or check | individual | States) | | ************** | | | | | ☐ Al | States |
| AL IL MT RI | AK IN NE SC | AZ IA NV SD | AR KS NH TN | CA KY NJ TX | CO LA NM UT | CT ME NY VT | DE MD NC VA | MA ND WA | FL MI OH WV | GA MN OK WI | MS OR WY | MO PA PR |
| Full Name | (Last name | first, if ind | ividual) | | | | <u></u> . | | | | | |
| Business | or Residence | e Address (1 | Number an | d Street, C | City, State, | Zip Code) | | | | | | |
| Name of A | Associated B | roker or De | aler | | | | | | | | | <u></u> |
| States in V | Which Person | n Listed Ha | s Solicited | or Intends | to Solicit | Purchasers | | | | | | |
| (Chec | k "All State | s" or check | individual | l States) | • | | | | | | ☐ Al | l States |
| AL IL MT RI | AK IN NE SC | IA NV SD | AR KS NH TN | CA KY NJ TX | CO LA NM UT | ME NY VT | MD NC VA | MA ND WA | FL MI OH WV | GA MN OK WI | MS OR WY | ID MO PA PR |
| Full Name | : (Last name | first, if ind | lividual) | | | | | - | | | | |
| Business | or Residenc | e Address (| Number ar | nd Street, (| City, State. | Zip Code) | | | | | | · |
| Name of A | Associated B | roker or De | ealer | | | | | | | | • | |
| States in V | Which Perso | n Listed Ha | s Solicited | or Intend | s to Solicit | Purchasers | <u> </u> | | | | | |
| | k "All State | | | | | | | | | • | . 🗌 A | Il States |
| AL IL MT RI | AK IN NE SC | AZ IA NV SD | AR KS NH TN | CA KY NJ TX | CO LA NM UT | CT ME NY VT | DE MD NC VA | DC MA ND WA | FL MI OH WV | GA MN OK WI | HI MS OR WY | ID MO PA PR |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. | | |
|----|--|---------------------|--|
| | • | Aggregate | Amount Already |
| | Type of Security | Offering Price | Sold |
| | Debt5 | | \$ |
| | Equity | | |
| | ☐ Common ☐ Preferred | | |
| | Convertible Securities (including warrants) | <u> </u> | \$ |
| | Partnership Interests | | |
| | Other (Specify DRILLING/COMPLETION | 1,750,000 | s <u>-0-</u> |
| | Total | S | \$ |
| | Answer also in Appendix, Column 3, if filing under ULOE. | | |
| 2. | offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | Number Investors | Aggregate Dollar Amount of Purchases |
| | Accredited Investors | 0- | s <u>-0-</u> |
| | Non-accredited Investors | | \$ |
| | Total (for filings under Rule 504 only) | | \$ |
| | Answer also in Appendix, Column 4, if filing under ULOE. | | |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. | | |
| | Type of Offering | Type of Security | Dollar Amount Sold |
| | Rule 505 | | \$ |
| | Regulation A | | \$ |
| | Rule 504 | | \$ |
| | Total | | \$ |
| 4 | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | | |
| | Transfer Agent's Fees | |] \$ |
| | Printing and Engraving Costs | | \$ 256000 |
| | Legal Fees | | \$ 17,500 |
| | Accounting Fees | | y \$ 17,500 |
| | Engineering Fees | |] \$ |
| | Sales Commissions (specify finders' fees separately) | |] \$ |
| | Other Expenses (identify) ADMIN OVERHEAD-LOCATION-LEASE COSTS | | s 45,000 |
| | Total | | § 105,000 |

| | b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Q | ag price given in response to Part C — Question 1 | | |
|-----|--|--|--|--|
| | proceeds to the issuer." | | | § 1,645,000 |
| 5. | Indicate below the amount of the adjusted gross proceeds of the purposes shown. If the amount for any check the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part 6 | purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross | | |
| | | ` | Payments to Officers, Directors, & Affiliates | Payments to Others |
| | Salaries and fees | | <u></u> \$ | _ 🗆 \$ |
| | Purchase of real estate | | \$ | _ 🗆 \$ |
| | Purchase, rental or leasing and installation of mach and equipment | inery | | _ 🗆 \$ |
| | Construction or leasing of plant buildings and facil | lities | \$ | _ 🗆 \$ |
| | Acquisition of other businesses (including the valu offering that may be used in exchange for the asset | s or securities of another | | |
| | issuer pursuant to a merger) | | | |
| | Repayment of indebtedness | | _ | |
| | Other (specify): DRILLING/COMPLETION | | | s 1,645,00 |
| | | | \$ | _ |
| | Column Totals | | | |
| | Total Payments Listed (column totals added) | | | |
| • | At the second of | D. FEDERAL SIGNATURE | | |
| sie | e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to furn information furnished by the issuer to any non-accr | undersigned duly authorized person. If this noti | ce is filed under R ission, upon writt | ule 505, the following ten request of its staff |
| iss | uer (Print or Type) | Signature) | Date | |
| A | DAIR DEVELOPMENT 2008, L.P. | Clarket | 05-29-20 | 008800 |
| | me of Signer (Print or Type) AY SHELTON | Title of Signer (Print of Type) PRESIDENT | | |

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

| | | E. STATE SIGNATURE | | | | | | | | |
|----------|---|--|--------------------------------------|-------------------------------|-----------------------------|--|--|--|--|--|
| 1. | Is any party described in 17 CF provisions of such rule? | R 230.262 presently subject to any of the di | squalification | Yes | No | | | | | |
| | | See Appendix, Column 5, for state | response. | | | | | | | |
| 2. | The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Fo D (17 CFR 239.500) at such times as required by state law. | | | | | | | | | |
| 3. | 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by issuer to offerees. | | | | | | | | | |
| 4. | limited Offering Exemption (UI | nts that the issuer is familiar with the condit LOE) of the state in which this notice is filed n of establishing that these conditions have | and understands that the issuer | e entitled to claiming the | the Uniform availability | | | | | |
| | uer has read this notification and ki thorized person. | nows the contents to be true and has duly cause | ed this notice to be signed on its t | behalf by the | undersigned | | | | | |
| lssuer (| (Print or Type) | Signature | Date | | | | | | | |
| Name (| Print or Type) | Title (Print or Type) | | | | | | | | |

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

5 ı 2 3 4 Disqualification under State ULOE Type of security (if yes, attach Intend to sell and aggregate offering price explanation of Type of investor and to non-accredited waiver granted) investors in State offered in state amount purchased in State (Part C-Item 2) (Part E-Item 1) (Part C-Item 1) (Part B-Item 1) Number of Number of Accredited Non-Accredited Yes No State Yes No Investors Amount Investors Amount ΑL ΑK AZAR CA CO CT DE DC FL $\mathsf{G}\mathsf{A}$ н ID lLΙN lA KS KY LA ME MDMA Mi MN MS

APPENDIX

APPENDIX. 5 2 3 1 Disqualification under State ULOE Type of security and aggregate (if yes, attach Intend to sell explanation of to non-accredited offering price Type of investor and offered in state amount purchased in State waiver granted) investors in State (Part E-Item 1) (Part C-Item 2) (Part B-Item 1) (Part C-Item 1) Number of Number of Non-Accredited Accredited No Yes No Investors Investors Amount Yes State Amount MO MT NE NV NH NJ NM NY NC ND OH OK OR PΑ RI SC \$D TN TX UT VT VΑ WA W٧

WI

| d- | The Park | | | APPI | ENDIX | t | , p | | |
|-------|------------------------|--|---|--|--------|--|---------------------------|-----|-----------|
| 1 | 1 2 3 Type of security | | | | | 4 | | | ification |
| : | to non-a | to sell ccredited s in State -Item 1) | and aggregate offering price offered in state (Part C-Item 1) | Type of investor and explanation amount purchased in State (Part E-Item 2) (Part E-Item 2) | | | amount purchased in State | | |
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No |
| WY | _ | | | | | | | | |
| PR | | | | | | | | | |

